

**Congress of the United States**  
**Washington, DC 20515**

October 7, 2005

The Honorable Rob Portman  
United States Trade Representative  
600 17<sup>th</sup> Street, NW  
Washington, DC 20508

Dear Mr. Ambassador:

We are writing to request your assistance in establishing an Assistant U.S. Trade Representative for Public Health with appropriate staffing, and to include public health representatives on the Administration's trade advisory committees. Provisions affecting access to health care have been included in numerous recent free trade agreements (FTAs) and are under consideration for inclusion in several future agreements, including those with three Andean countries, Thailand, and various countries in the Middle East. As such, we believe it is critical that the Administration update its trade negotiating team and advisory committees to address the lack of adequate public health sector representation.

Increasingly, provisions in our trade agreements have implications for the protection of public health and safety, including access to health care services and prescription drugs. Recent trade agreements have had implications for national health laws in both the United States and our trading partners.

For example, language preventing the importation of pharmaceuticals was included in FTAs with Australia, Singapore and Morocco. Provisions originally proposed by the Administration in the U.S.-Australia FTA negotiations would have required the Government of Australia to significantly alter how it operates its prescription drug benefit and could have had serious repercussions for U.S. drug coverage programs, including Medicare, Medicaid, and Veterans Administration and Department of Defense health plans. Further, language affecting test data and patents for pharmaceuticals has been included in every recent FTA. In fact, earlier this year, Guatemala, which has the largest number of people infected with HIV/AIDS in Central America, was forced to repeal a law protecting its ability to access life saving pharmaceuticals in order to comply with its CAFTA commitments.

Currently, an Assistant USTR for Pharmaceutical Policy advocates on behalf of the prescription drug companies when issues arise affecting their industry. However, there is no Assistant USTR to provide an independent voice on public health issues.

In addition, there is only one representative of the public health sector on any of the Administration's trade advisory committees, which were established by Congress in 1974 to provide balanced input from outside parties interested in U.S. trade negotiations and are required by law to be broadly representative of affected interests. Of particular concern is

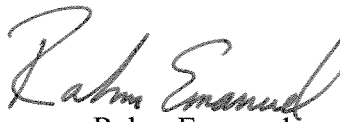


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the fact that at least six of fifteen members of the advisory committee on intellectual property represent the pharmaceutical industry, while none represent the public health sector. As currently structured, these committees cannot provide the Administration with a complete picture of the impact of international trade and trade agreements on public health.

Congress has consistently directed the Administration to negotiate trade policies that protect public health, including access to affordable prescription drugs and health care services. However, our current system shuts out the very voices that would ensure the realization of those goals. Accordingly, we urge you to appoint public health advocates to address public health issues within USTR and the trade advisory committee system. Only then can we ensure that the health care of millions of individuals does not continue to take a back seat to the special interests.

We hope you will respond to this request in a timely and positive manner.

Sincerely,

		
Rahm Emanuel	Charles B. Rangel	Pete Stark
Member of Congress	Member of Congress	Member of Congress